

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	National Phase
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	METHOD OF ANALYZING BIOSAMPLE BY LASER ABLATION AND APPARATUS THEREFOR
Attorney Docket Number::	1794-0190PUS1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	15
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Yoshihide
Family Name::	HAYASHIZAKI
City of Residence::	Tsukuba-Shi
Country of Residence::	Japan
Street of mailing address::	22-8, Inarimae

City of mailing address:: Tsukuba-Shi
State or Province of mailing address:: Ibaraki
Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 305-0061

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Jun
Family Name:: KAWAI
City of Residence:: Yokohama-Shi
Country of Residence:: Japan
Street of mailing address:: c/o Riken Yokohama Institute
7-22, Suehiro-cho 1-chome, Tsurumi-ku

City of mailing address:: Yokohama-Shi
State or Province of mailing address:: Kanagawa
Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 230-0045

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Toshizo
Family Name:: HAYASHI
City of Residence:: Tokyo
Country of Residence:: Japan
Street of mailing address:: c/o Kabushiki Kaisha Dnaform,
3-35 Mita 1-chome, Minato-ku
City of mailing address:: Tokyo

Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 108-0073

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Mamoru
Family Name:: KAMIYA
City of Residence:: Tokyo
Country of Residence:: Japan
Street of mailing address:: c/o Kabushiki Kaisha Dnaform,
3-35 Mita 1-chome, Minato-ku
City of mailing address:: Tokyo
Country of mailing address:: Japan
Postal or Zip Code of mailing address:: 108-0073

Correspondence Information

Correspondence Customer Number:: 02292

Representative Information

Representative Customer Number:: 02292

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application is a	National Stage of	PCT/JP2005/005809	03/29/05

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Japan	2004-097260	03/30/04	Yes

Assignee Information

Assignee name:: RIKEN
 Street of mailing address:: 2-1, Hirosewa
 City of mailing address:: Wako-Shi, Saitama
 Country of mailing address:: Japan
 Postal or Zip Code of mailing address:: 351-0198

Assignee name:: Kabushiki Kaisha Dnaform
 Street of mailing address:: 3-35 Mita 1-chome, Minato-ku
 City of mailing address:: Tokyo
 Country of mailing address:: Japan
 Postal or Zip Code of mailing address:: 108-0073